

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K68496 (4)

1. Corporation Name
NATIONAL MARINE, INC.

Principal Place of Business
3575 MYSTIC POINT DR
3200 S ANDREWS AVE. SUITE 112
AVENTURA FL 33180
US

Mailing Address
3575 MYSTI POINTE AVVE
3200 S ANDREWS AVE. SUITE 112
N MIAMI BEACH FL 33180-2553
US



2. Principal Place of Business 21 3575 Mystic Pt. DR. Suite, Apt. #, etc. 22 23 Aventura, FL City & State 24 33180 Zip 25 Country	2a. Mailing Address 26 3575 Mystic Pt. DR. Suite, Apt. #, etc. 27 28 Aventura, FL City & State 29 33180 Zip 30 Country
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3. Date Incorporated or Qualified 02/27/1989	3a. Date of Last Report 06/19/1996
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

DU TOIT, RUSSELL
3575 MYSTIC POINTE DR
N MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

81 Name DuToit, Russell
82 Street Address (P.O. Box Number is Not Acceptable) 10850 SW 27 CT.
83
84 City DAVIE
85 FL 33328

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP P DUTOIT, RUSSELL 10850 SW 27 CT DAVIE FL VP ELLIOTT, E.B. 5845 S.W. 97TH ST. MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)